

## ATTACHMENT B

**City of Redmond  
Bid Pricing Submittal Sheet  
IFB 10594-17/ALE  
LWIT Redmond Campus**

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_, State: \_\_\_\_\_, Zip: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_

We offer this submittal in response to the City's Invitation For Bid. The prices listed provided below are fully-burdened, including direct labor cost, overhead, profit, and any materials.

Installation price is to include the purchase of all listed materials, their installation and all other labor and materials for the re-cabling effort and removal and disposal of all scrap materials. Removal and disposal of scrap material is to be done in compliance with all local and federal laws and requirements.

### Redmond Senior Center Modification

Quantity	Service	Lump Sum Price	
1 Lot	Attachment A, Scope of Work	\$	
1 Lot	Sales Tax (10%)	\$	
1 Lot	Total	\$	
1 Lot	Payment/Performance Bond	\$	

#### **Sub-contractors:**

Identify any sub-contractors and their prices for any work with your submittal. Sub-contractors must not be on debarred on state or Federal lists. Sub-contractors are subject to prevailing wage requirements. Subcontractors may be subject to same background checks as the Contractor.

**Bid Validity:** 60 days calendar days from bid receipt date. The City of Redmond reserves the right to request an extension of the 60 day period.

REFERENCES:

Supplier to furnish the project name, address, phone number and contact for three of similar size and scope of projects that have been completed within the last 24 months.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

City of Redmond, Business License #: \_\_\_\_\_ or \_\_\_\_ I/we agree to obtain upon award of this purchase.

Washington State Contractors License Number: \_\_\_\_\_.

Washington Unified Business Identifier (UBI) \_\_\_\_\_

Employment Security Dept. Number \_\_\_\_\_

State Excise Tax Registration Number \_\_\_\_\_

Industrial Insurance Coverage \_\_\_\_\_

The Bidder certifies that it is not disqualified/barred from bidding on any public works programs: \_\_\_\_\_

([www.lni.wa.gov/TradesLicensing/PrevWage/AwardingAgencies/DebarredContractors/default.asp](http://www.lni.wa.gov/TradesLicensing/PrevWage/AwardingAgencies/DebarredContractors/default.asp)).

The undersigned agrees fully with the terms and conditions of this Invitation For Bid and acknowledges they are authorized to sign bids for the company.

Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_